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The Importance of Health Values Among Health Care Providers



Abstract: *Medical professionals' healthy eating and physical activity behaviors are likely to wane as other life events and everyday pressures increase. This is vital because as health behaviors decrease, the likelihood that this topic is addressed with patients also decreases. Increased training to improve health care providers' knowledge about lifestyle behaviors may be inadequate to actually bring about a healthier lifestyle. The area of personal identity and value formation may shed light on a significant barrier in this area. Developing health care professionals who have values consistent with a healthy diet and physical activity, instead of just being informed about it, would increase the likelihood that healthy behavior changes are discussed with patients. Strategies to encourage value formation around healthy lifestyles among medical professionals are discussed.*

Keywords: health care providers; identity; value; physical activity; diet

Personal experiences, values, assumptions, and opinions of health care providers can directly affect the care that is given to patients.¹⁻³ For example, physicians who have a body mass index (BMI) in the healthy

range are more likely to have higher self-efficacy for providing lifestyle counseling than those who have a BMI in the overweight or obese ranges and are more confident in providing exercise counseling.⁴ Conversely, physicians with overweight status or obesity had higher self-efficacy in prescribing weight loss

As discussed by Recker and colleagues in this issue, 90% of medical students report having at least a moderate activity level⁷; however, as work demands increase activity levels of providers decrease.⁹ Similarly, medical students' healthy eating habits begin to decline during the clinical years.^{10,11} Whether

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medications than their peers in a healthy BMI range.⁴ Clinicians who watched their diets vigorously were more likely to counsel about nutrition or screen their patients for cholesterol and obesity risk.^{5,6} Physicians who exercise are more likely to prescribe exercise to their patients.^{7,8} A better understanding of the reason that these personal practices translate into discussions with patients could provide insight into how to increase the likelihood that practitioners encourage a healthy lifestyle.

intentional or not, there is general acknowledgement among psychologists, therapists, counselors, and social workers that the health care provider's "self" is an important element of the provider-patient relationship.¹² Health care providers that find a way to overcome their own barriers to eat healthy and be active may be better equipped to skillfully use the "self" in the patient-provider relationship to promote healthy lifestyle among their patients. Individuals with health as a central theme in their identity are more

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likely to engage in healthy behaviors, to share information about lifestyle behaviors with others, and to overcome barriers.⁵ In this article, we will provide several examples of identity formation with specific health behaviors and provide recommendations for health care providers to form a stronger identity of healthy lifestyle behaviors.

Theoretical Perspective

Identity is a fusion of memories, traits, experiences, social relationships, and social group memberships that culminate in forming a sense of self. It is the accumulation of characteristics that define who we are.^{13,14} For most individuals, identity formation initiates during adolescence while experiencing various behaviors, and exploring practices and roles in the process of self-discovery. This notion was first introduced by Erik Erikson in his theory of identity formation.¹⁵ While Erik Erikson's theory focuses on adolescents working through refining their sense of self to form their identity,¹⁶ identity is malleable throughout the lifespan.¹⁷ An identity can change with time based on experiences and outside influences.¹⁶

Values refer to the relative importance that an individual places on issues or actions. They form a person's sense of priority and direct individuals' attitudes, goals, and evaluations. Values are relatively stable and affects behaviors and decisions.^{14,18} When faced with a conflict of self-control, having a higher value placed on a specific goal compared to the other behaviors in conflict can result in successfully curbing behaviors and achieving the desired goal.¹⁹ This is an overarching prediction of the identity-value model that ties identity and values together with the achievement of self-control.¹⁹ Ultimately, self-control can be enhanced by identity when the goal-relevant behaviors have higher value tied to a person's self-relevance. In other words, had the goals not been viewed as self-relevant, they would have been undervalued relative to the undesirable behaviors and ultimately ignored.¹⁹

Identity and values are forces that heavily influence how personal health is viewed. Health-related behaviors are affected by values and beliefs and then tied to identity.²⁰ For example, woman physicians who identify as "preventionists," people who value the prevention of diseases in terms of their personal health, significantly had desirable dietary and physical activity habits.⁵ These personal health-related lifestyle preferences and values are likely to be transferred into professional practice.²¹ Physicians' value for preventing diseases is a robust predictor for their screening and counseling practices to patients.⁵

Although most, if not all, health care providers would likely report that they *value* healthy lifestyles or prevention of disease, not all have a *value system* about healthy lifestyles that affects their own life. For example, few would argue that physical activity and a healthy diet are important factors related to health, but some individuals create lifestyle changes that reflect this knowledge. Furthermore, some place this value system as a high priority in their life and ensure that they continue to engage in it even when it is difficult. It is this value system that leads to how one views themselves (ie, their identity) that this article addresses.

Valuing Physical Activity

Maintaining physical activity and determining which characteristics promote physical activity later in life among health care professionals is vital to prevent disease related to inactivity in the United States.^{1,8} One possible way to increase the likelihood that health professionals in training adopt a value system and/or identity of health promotion is through mentorship. A mentor acts like a role model for students' behavior, values, and attitudes development; students benefit from working with a mentor who shares values with them.²² Likewise, medical students often feel that lectures are not enough to promote health-related behaviors and believe that faculty members should be role models by adopting a healthy lifestyle.²³ Furthermore, people desire to line up their attitudes and

behaviors with others who share them.²⁴ For example, medical students engaged in physical activity mostly prefer exercising in groups because having friends and socializing motivates them.²⁵ Building a social identity in terms of physical activity among health care providers can encourage individuals to be physically active for becoming part of this social network.

Valuing Healthy Diet

Numerous teaching modules and curriculum guidelines have been developed to improve medical students' experiences and clinical decision-making skills on nutrition-related topics; however, the promotion of changes in students' own dietary practices are seldom addressed.²⁶ This missing component of engagement of the behavior being taught is critical if the concept is likely to help form a value system consistent with the teaching.³ Some initial work has begun in the area of value formation with regard to diet in health care professionals. In a novel study, self-assessment of eating habits and cardiovascular risk was integrated into a medical school nutrition curriculum, which resulted in improved dietary habits among students at the end of the year.²⁶ Assessment of one's own dietary habits can facilitate identification of values and identity.

In helping facilitate a value system consistent with a healthy diet, it is critical to consider the cultural identity of the individual. Cultural identity is an important sociocultural value that shapes dietary practices.²⁷ A focus group study with an Asian Indian sample identified that lack of awareness of culturally unique dietary patterns often resulted in inappropriate dietary advice and did not promote desirable dietary change.²⁸ Ensuring a culture-centered approach is incorporated for promoting a healthy diet will be critical among health care professionals.

Conclusion

Building a value system that places health at the center of our values can be

challenging yet invaluable in helping communities flourish and individuals thrive. The creation of a shared value for health through community has the potential to perpetuate prevention of diseases, to extend American's lifespan, and improve their quality of life. It may be assumed that individuals in the health care field have a value system that is in line with healthy lifestyles; however, the level to which these providers have formed a "health identity" or value system consistent with healthy lifestyles is incredibly variable. If a value system for healthy lifestyle behaviors is instilled in our health care professionals, it is likely to translate to the patients for whom they provide care. Simply providing education about physical activity and nutrition is likely insufficient to create changes in one's identity or values. Increasing the likelihood that health care professionals will develop a value system or an identity related to health promotion has the potential to have far-reaching implications to improving the care provided to patients.

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